PART B - FEE(S) TRANSMITTAL

FIRST NAMED INVENTOR

WASHINGTON OFFICE

CUSTOMER NUMBER

APPLICATION NO.

CURRENT CORRESPONDENCE ADDRESS (Note: Use Block that any change of address) JUN 0 3 2008

FILING DATE

SUGHRUE MION, PLLC 2100 PENNSYLVANIA AVENUE, NW SUITE 800 WASHINGTON, DC 20037

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CONFIRMATION NO.

ATTORNEY DOCKET NO.

10/727,594	12/05/2003		Marc EDIM	0	Q785	7498				
TITLE OF INVENTION: FIXED TRANSMITTING STATION WITH ELECTROMAGNETIC FIELD PROBE										
APPLN. TYPE	SMALL ENTITY	ISSUE FEE	PUBLICAT FEE	ION PREV.	PAID ISSUE FEE	TOTAL FEE(S) DUE	DATE DUE			
nonprovisional	NO	\$1440.00	\$300.00		\$0.00	\$1,740.00	06/07/2008			
	ART UNI	T CLAS	SS-SUBCLASS							
	John J. LEE		2618	4	55-561000					
1. Change of correspon	dence address or indi	cation of "Fee Address"	(37 CFR 1.363	2. For printing	on the patent front p	age list 1 Sugh	rue Mion, PLLC			
☐ Change of corresponder DTO/SB/122) attached		nange of Correspondence	e Address form	(1) the names of up to 3 registered patent attorneys or agents OR, alternatively,						
		ess" Indication form PT f a Customer Number is		(2) the name of a single firm (having as a member a registered attorney or agent) and the 3						
03-02 of more recently	TTTTTELLED. CSC C	a Customor rumber is	roquirou.	names of up to 2 registered patent attorneys or						
				agents. If no	name is listed, no na	ame will be				
3. ASSIGNEE NAME	AND RESIDENCE	DATA TO BE PRINTE	D ON THE PAT		pe)					
PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.										
(A) NAME OF ASSIGNEE (B) RESIDENCE: (CITY and STATE OR COUNTRY)										
ALCATEL										
							•			
Please check the appro	priate assignee categ	ory or categories (will no	ot be printed on t	the patent): 🗆 Inc	dividual 🗹 Corporati	ion or other private group	entity Government			
4a. The following fee(s) are submitted:		4b. Payme	4b. Payment of Fee(s): (Please first reapply any previously paid issue fee shown above)						
☑ Issue Fee				A check is enclosed.						
☑ Publication Fee (No	t permitted)	•	ment by credit card. Form 1310-2038 is attached.							
☐ Advance Order - # (ne Director is hereby authorized to charge the required fee(s), any deficiency, or credit any payment, to Deposit Account Number 19-4880 (enclose an extra copy of this form).							
			e USPTO is directed and authorized to charge all required fees to Deposit Account No. 80. Please also credit any overpayments to said Deposit Account.							
5. Change in Entity Sta	atus (from status indi-	cated above)								
□ a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27. □ b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).										
The Director of the USPTO is requested to apply the Issue Fee and Publication Fee (if any) or to re-apply any previously paid issue fee to the application identified above.										
NOTE: The Issue Fee and Publication Fee (if required) will not be accepted from anyone other than the applicant; a registered attorney or agent; or the assignee or other party in interest as shown by the records of the United States Patent and Trademark Office.										
Authorized Signature	_	04 /a	1	Date		June 3, 2008				
Typed or Printed Nam	e I	David J. Cushing		Registration N		28,703				
Modified PTOL 95 /P	for use through 08/31/2	010		86/84/289A	ANUMDARY BOORGOSS	194999 19727594				
Modified F1OL-03 (R	06/07) Apploved	tor use unough oo/3 1/2	uiu.		01 FC:1501 02 FC:1504	1440.00 DA 303.00 DA				

PART B - FEE(S) TRANSMITTAL

CURRENT CORRESPONDENCE ADDRESS (Oct. Use Block for any change of address)

washington office 23373 customer number



SUGHRUE MION, PLLC 2100 PENNSYLVANIA AVENUE, NW SUITE 800 WASHINGTON, DC 20037

Modified PTOL-85 (Rev. 08/07) Approved for use through 08/31/2010.

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10/727,594 12/05/		5/2003	Marc EDIMO			Q785	7498					
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APPLN. TYPE		ALL FITY	1		PUBLICAT FEE	ION PREV.	PAID ISSUE FEE	TOTAL FEE DUE	(S) DATE DUE			
nonprovisional	N	10	\$144	10.00	\$300.00		\$0.00	\$1,740.00	06/07/2008			
EXAMINER				ART UNI	T CLA	SS-SUBCLASS						
	John J. LEE				2618		155-561000					
1. Change of correspon	dence add	lress or indi	cation of "Fe	ee Address"	(37 CFR 1.363	2. For printing	on the patent front p	age list 1	Sughrue Mion, PLLC			
☐ Change of correspondence address (or Change of Correspondence Address for PTO/SB/122) attached.						(1) the name	s of up to 3 regist ents OR, alternativel	ered patent				
☐ "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Re 03-02 or more recent) ATTACHED. Use of a Customer Number is required.						(2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.						
3. ASSIGNEE NAME	AND RE	SIDENCE	DATA TO I	BE PRINTE	ON THE PAT		rpe)					
PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.												
(A) NAME OF ASSIGNEE (B) RESIDENCE: (CITY and STATE OR COUNTRY)												
ALCATEL		Paris, Fra	nce									
Please check the appropriate assignee category or categories (will not be printed on the patent): 🗆 Individual 🗹 Corporation or other private group entity 🗅 Government												
4a. The following fee(s) are submitted:					4b. Payme	4b. Payment of Fee(s): (Please first reapply any previously paid issue fee shown above)						
☑ Issue Fee					☐ A check	☐ A check is enclosed.						
☑ Publication Fee (No small entity discount permitted)					☐ Paymen	t by credit card.	Form 1310-2038 is a	ttached.				
☐ Advance Order - # of Copies						☑ The Director is hereby authorized to charge the required fee(s), any deficiency, or credit any overpayment, to Deposit Account Number 19-4880 (enclose an extra copy of this form).						
							and authorized to cl t any overpayments t		fees to Deposit Account No.			
5. Change in Entity Status (from status indicated above)												
□ a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27. □ b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).												
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Authorized Signature			(14)	16	1	Date		June 3, 20	008			
Typed or Printed Name	•	I	David J. Cus	hing)	Registration N	0.	28,703				